



Diane Racicot
PATENT

Atty. Docket No. ADI-099
(120290/ 155734)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Jones *et al.* CONF. NO.: 3619

SERIAL NUMBER: 10/720,845 ART UNIT: 3728

FILING DATE: November 24, 2003 EXAMINER: Stashick, Anthony D.

TITLE: Shoe Closure System

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 23rd day of August 2005.

Diane Racicot
Diane Racicot

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Submitted herewith is/are:

1. Transmittal Form (1 pg.);
2. Fee Transmittal (1 pg.);
3. A check in the amount of \$680.00;
4. Amendment and Response (17 pgs.);
5. Third Supplemental Information Disclosure Statement (2 pgs.);
6. Form PTO-1449 (1 pg.);
7. Copies of references B7-B9; and
8. Return receipt postcard

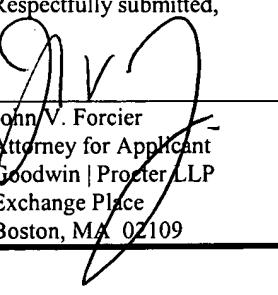
**TRANSMITTAL
FORM**



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|--|---------------------------|----------------------|
| | Application Serial Number | 10/720,845 |
| | Filing Date | November 24, 2003 |
| | First Named Inventor | Jones |
| | Group Art Unit | 3728 |
| | Examiner Name | Stashick, Anthony D. |
| | Attorney Docket No. | ADI-099 |
| | Confirmation No. | 3619 |
| | Patent No. | Not applicable |
| | Issue Date | Not applicable |

ENCLOSURES (check all that apply)

| | | |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) |
| <input checked="" type="checkbox"/> Amendment and Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] | <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> Terminal Disclaimer | <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 |
| <input type="checkbox"/> Petition for Extension of Time | <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application | <input type="checkbox"/> Additional Enclosure(s) (please identify below) |
| <input checked="" type="checkbox"/> Third Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations | <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Amendment After Allowance | |
| <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate) | |

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| CORRESPONDENCE ADDRESS | SIGNATURE BLOCK |
| Direct all correspondence to: Patent Administrator Goodwin Procter LLP Exchange Place Boston, MA 02109 Tel. No.: (617) 570-1000 Fax No.: (617) 523-1231 Customer No. 051414 | Date: August 23, 2005 Reg. No. 42,545 Tel. No.: (617) 570-1607 Fax No.: (617) 523-1231 |
| Respectfully submitted,  John V. Forcier Attorney for Applicant Goodwin Procter LLP Exchange Place Boston, MA 02109 | |

| <i>Complete if Known</i> | |
|---------------------------|---------------------|
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